<i>y</i>			
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE			
"In re Patent Application of 6 PE Atty RYM-2635-200 Dkt.			
Dkt. C# M#			
SUZUKI et al (JUN 0 4 2009) C/A.U. 1795			
Serial No. 10/765,881 Examiner: Kaj K. Olsen Date: June 4, 2009			
Filed: January 29, 2004 Date: June 4, 2009			
Title: GAS CONCENTRATION DETECTING APPARATUS			
Commissioner for Patents			
P.O. Box 1450 Alexandria, VA 22313-1450			
Alexandra, VA 22010 1400			
Sir:			
RESPONSE/AMENDMENT/LETTER This is a response/amendment/letter in the above-identified application and includes an attachment we	hich is h	ereby	,
incorporated by reference and the signature below serves as the signature to the attachment in the all signature thereon.	bsence o	f any	other
☐ Correspondence Address Indication Form Attached.			
Fees are attached as calculated below:			
Total effective claims after amendment 59 minus highest number previously paid for 101 (at least 20) = 0 x \$52.00 \$0.00 (1202)/\$0.00	(2202)	\$	
Independent claims after amendment 3 minus highest number			
previously paid for 8 (at least 3) = $0 \times 220.00 \$0.00 (1201)/\$0.00) (2201)	\$	
If proper multiple dependent claims now added for first time, (ignore improper); add	. (0000)	•	
\$390.00 (1203)/\$0.00 Petition is hereby made to extend the current due date so as to cover the filing date of this) (2203)	Þ	
paper and attachment(s) One Month Extension \$130.00 (1251)/\$0.00 (2251)		
Two Month Extensions \$490.00 (1252)/\$0.00 ((2252)		
Three Month Extensions \$1110.00 (1253/\$0.00 (2253)		
Four Month Extensions \$1730.00 (1254/\$0.00 Five Month Extensions \$2350.00 (1255/\$0.00) (2254)) (2255)	\$	
Terminal disclaimer enclosed, add \$140.00 (1814)/ \$0.00			
☐ Applicant claims "small entity" status. ☐ Statement filed herewith	,		
Rule 56 Information Disclosure Statement Filing Fee \$180.00 ((1806)	\$	0.00
Assignment Recording Fee \$40.00	(8021)	\$	0.00
Other:	,,	\$	0.00

☐ CREDIT CARD PAYMENT FORM ATTACHED.

The Commissioner is hereby authorized to charge any <u>deficiency</u>, or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Account No. 14-1140.

901 North Glebe Road, 11th Floor Arlington, Virginia 22203-1808 Telephone: (703) 816-4000 Facsimile: (703) 816-4100

RYM:dmw

NIXON & VANDERHYE P.C.

By Atty: Raymønd Y. Mah, Reg. No. 41,426

Signature:

TOTAL FEE \$

0.00